

Notification of Hazardous Waste Site.

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Lighting Act of 1999 and making the letter of the item

Please type or print in ink. If you need

	be mailed by June 9, 1981.	must which applies.	106 09		-				
		II.	#352	145-00	0-001-290				
A	Person Required to Notify:	G. A.			·				
	Enter the name and address of the p	erson Name Sherex Che	Name Sherex Chemical Company, Inc.						
	or organization required to notify.	Street P. O. Box	9 Rt. 24	·					
		Cnv Mapleton		State IL	Zip Code 61547				
В	Site Location:								
	Enter the common name (if known) a	ind Name of Site Sherex	Chemical Company	, Inc.					
	actual location of the site.	Street P.O. B	Box 9 Rt. 24						
7	LN095792859	city Mapleton	county Peoria	State IL.	Z Ip Code 61547				
Z	Person to Contact:								
	Enter the name, title (if applicable), a	nd Name (Last, First and Title)	Kan Johnson K	EN					
	business telephone number of the pe	rson	Name (Last, First and Title) Ken Johnson, KEN						
	to contact regarding information submitted on this form.	Friend 3(1)9-697-62	Phone 309-697-6220						
					·				
D	Dates of Waste Handling:								
	Enter the years that you estimate wa treatment, storage, or disposal began ended at the site.		To (Year) 1977						
	Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category. 1. □ Organics 2. □ Inorganics 3. □ Solvents 4. □ Pesticides 5. ☒ Heavy metals Place an X in the appropriate box applicable category.	urce of Waste: ace an X in the appropriate xes. Mining Construction Fextiles Paper/Printing Leather Tanning	listed in the regulation appropriate four-digit the list of hazardous	iste: four-digit number ons under Section the the wastes and cod legion serving the section is the section serving the section serving the section is the se	er to each hazardous waste on 3001 of RCRA. Enter the boxes provided. A copy of es can be obtained by ne State in which the site is				
	8. ☐ PCBs 8. 9. ☐ Mixed Municipal Waste 9. 10. ☐ Unknown 10.	☐ Iron/Steel Foundry ☐ Chemical, General ☐ Plating/Polishing ☐ Military/Ammunition							
		☐ Electrical Conductors ☐ Transformers ☐ Utility Companies ☐ Sanitary/Refuse	0.0016	57 JUN -9 8	<u>.</u>				
	, 16. 17.	☐ Photofinish ☐ Lab/Hospital ☐ Unknown ☐ Other (Specify)	00016	EPA Region 5 F	Records Ctr.				

Form Approved OMB No. 2000-0138 EPA Form 8900-1

• ′	Notification of Hazardous Waste Site	Side Two	100	•			
F	Waste Quantity:	Facility Type	Total Facility Waste	Amount			
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. D Piles	cubic feet	· ·			
	In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons. In the "total facility area" space, give the estimated area size which the facilities	2 ☐ Land Treatment - 3. ☒ Landfill 4. ☐ Tanks 5. ☐ Impoundment 6. ☐ Underground Injection	gallons 25 - 30 M	gal. G			
			Total Facility Area				
			square feet 480	<u> </u>			
		7. Drums, Above Ground	acres				
	occupy using square feet or acres.	8. ☐ Drums, Below Ground 9. ☐ Other (Specify)					
G	Known, Suspected or Likely Releases	to the Environment:					
	Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment. ☐ Known ☒ Suspected ☐ Likely ☐ None						
	Note: Items Hand I are optional Completing these items will assist EPA and State and local governments in locating and assessin hazardous waste sites. Although completing the items is not required, you are encouraged to do so.						
H	Sketch Map of Site Location: (Options	al)					
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a						
	publishing map showing the site location.						
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		,					
			`				
		_					
	Description of Site: (Optional)			_			
•	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells,						
	springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.						
	•						
J	Signature and Title:						
	The person or authorized representative (such as plant managers, superintendents,	Name William R. Starkey		Owner, Present ■			
	trustees or attorneys) of persons required to notify must sign the form and provide a	Sherex Chemical Co., Street P.O. Box 646		Owner, Past			
	mailing address (if different than address	P.U. DOX 040		□ Transporter□ Operator, Present			
	in item A). For other persons providing notification, the signature is optional.	Crty Dublin Sta	ete()hio Zip Code 43017	☐ Operator, Past			
	Check the boxes which best describe the relationship to the site of the person	Signature (1) Kather	Date 6/8/8/	☐ Other			
	required to notify. If you are not required to notify check "Other".						



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Notification of Hazardous Waste Site

TL-174-08
United States
Environmental Protection Agency

Washington DC 20460

This initial notification information is required by Section 103(c) of the Com

Please type or print in ink. If you need additional space, use separate sheets of

hensive Environmental Response, Compen-paper. Indicate the letter of the item sation, and Liability Act of 1980 and must which applies. \$ \$1060\$											
	#1	#40	64	•			_	TL	5-00	0-001-4	129
Person Required to Notify: Enter the name and address of the person		*464 ILS-000-001-429 Name Ashland Chemical Company									
or organization required to notify.		Street	Street P. O. Box 2219						_		
		City		Columbi			State	ОН	Zıp Code	43216	_
Site Location: Enter the common name (if known) and actual location of the site		Name o	of Site	Sher	ex Chem	ical Comp	any				_
		Street		Rt. 24	<u> </u>	•					_
16005472981	- /	City	Mapl	eton_	County	Peoria	State	IL	Zıp Code	61547	_
Person to Contact:											=
Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form		Name (Last, Firs	t and Title)	MacDo 889-3709	onald, Ira	a A.				
Dates of Waste Handling:											_
Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site											
Waste Type: Choose the option you prefer to complete Option I: Select general waste types and source categories. If you do not know the general waste types or sources, you are Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001											
encouraged to describe the site in Item I—D General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap Check each applicable category. Source o Place an boxes.			e:		Specific EPA has listed in appropri the list of	the regulation ate four-digit of hazardous	ste: our-digit ons under number wastes a	number Section in the b	n 3001 of F poxes provides can be of	حفرت أحطام طاحاتان	he of
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		onstruction		ļ] [
	3 □ Solvents 3. □ Textiles			000		yn					
	I ☐ Pesticides 4. ☐ Fertilizer 5. ☑ Heavy metals 5. ☐ Paper/Printing						ļ ļ				
5. 幻 Heavy metals 6. 幻 Acids	•		_	Ì					ļ		
7. 🗆 Bases							↓				
8 🗆 PCBs	7. ☐ Iron/Steel Foundry8. ☑ Chemical, General			ļ							
9. Mixed Municipal Waste	• •	☐ Plating/Polishing							 		
10. □ Unknown	10 🗆 Mil	_	_		ļ	·			1		
11. ☐ Other (Specify)	11. □ Ele	•		1	<u> </u>				 		
	12. □ Tra				L		L		J L		
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	16. □ Lab			j							
	17. 🗆 Uni										

Form Approved OMB No. 2000-0138

EPA Form 8900-1

18 ☐ Other (Specify)

	Notification of Hazardous Waste Site	Side Two				
F	Waste Quantity:	Facility Type	`Total Facility Waste Amount '			
	Place an X in the appropriate boxes to indicate the facility types found at the site	1. □ Piles	cubic feet			
	In the "total facility waste amount" space	2. ☐ Land Treatment 3 ☒ Landfill	gallons 25-30 W K			
	give the estimated combined quantity	4. 🗆 Tankş	Total Facility Area			
	(volume) of hazardous wastes at the site using cubic feet or gallons. In the "total facility area" space, give the	5. Impoundment	square feet 480			
		6 ☐ Underground Injection	Square reer 400			
	estimated area size which the facilities occupy using square feet or acres.	 7. □ Drums, Above Ground 8. □ Drums, Below Ground 	acres			
		9 Other (Specify)				
G	Known, Suspected or Likely Releases t	o the Environment:				
_	Place an X in the appropriate boxes to indicate or likely releases of wastes to the environment	e any known, suspected,	☐ Known 🖄 Suspected 🗇 Likely 🗘 None			
	Note: Items Hand I are optional Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so					
Н	Sketch Map of Site Location: (Optional	1)				
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a					
	publishing map showing the site location.					
-	-		•			
i	Description of Site: (Optional)					
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.					
			•			
			`			
J	Signature and Title:					
•	The person or authorized representative	Name Ashland Chemical (Company			
	(such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional.	∑ Owner, Past				
		Street P. O. Box 2219	☐ Transporter			
		city Columbus sta	☐ Operator, Present☐ Operator, Present☐ Operator, Past☐ Opera			
	Check the boxes which best describe the relationship to the site of the person	Q11-100006	□ Other □ Date (6/8/8)			
	required to notify If you are not required to notify check "Other".	R. H. Toeniskoet				
	• • • • • • • •	K. O. IDENISKOETI	1 PT.			

R. H. Toeniskoetter

June 5, 1981

U. S. EPA Region 5 Sites Notification Chicago, IL 60604

Gentlemen:

Enclosed are EPA Forms 8900-1 for the facilities listed which Ashland Chemical Company may be required to report under Sec. 103(c), Comprehensive Environmental Response, Compensation and Liability Act of 1980.

Mapleton, IL East Palestine(Neal, WV), OH South Bend, IN (3)

Very truly yours,

RH Tomsesta

R. H. Toeniskoetter

RHT/md

enc.

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